

MARCH 8, 2004

**SCHAKOWSKY WARNS:
NURSE UNDERSTAFFING
JEOPARDIZES PATIENT CARE**

**ANNOUNCES PLAN TO INTRODUCE
THE NURSE STAFFING FOR PATIENT SAFETY AND QUALITY CARE ACT OF 2004**

CHICAGO, IL - At a town hall meeting with hundreds of nurses in Chicago, U.S. Representative Jan Schakowsky (D-IL) tonight announced plans to introduce legislation to address understaffing in hospitals that is *"harming patients and driving out dedicated and qualified nurses."* Schakowsky will introduce the Nurse Staffing for Patient Safety and Quality Care Act of 2004, a bill that *"would improve patient quality by ensuring that nurses are given manageable patient loads."*

Below is Schakowsky's statement:

I am so pleased to be here today to talk with you and to learn from you about the need to stop understaffing in hospitals - understaffing that is harming patients and driving out dedicated and qualified nurses. I am also proud to be working with SEIU on legislation - the Nurse Staffing for Patient Safety and Quality Care Act of 2004 - which I will introduce shortly.

You know better than anyone that we are facing a health care crisis of enormous proportions. We need to fight for universal health care - to make sure that no one in this country is denied the care that they need or faces bankruptcy because of illness or injury. SEIU and nurses have been at the forefront of that fight and I am so proud to be working with you in that effort.

But we are here tonight to talk about another health care crisis - the crisis of nurse understaffing that is jeopardizing quality here and across the country. This is a crisis that has not gotten the attention it deserves - but I guarantee you it will. Through your efforts, state legislatures and now Congress are considering legislation to deal with this crisis. In California, minimum nurse-to-patient ratios have become the law of the land. When we see survey after survey that showing that nurses do not believe that their own

family members would be guaranteed quality care in their own hospitals, we know that we have a problem. When patients are advised to hire "sitters" during their hospital stays so that they can go for help if a problem arises, we know that we have a problem.

We are going to talk tonight about your real-life experiences in trying to care for patients. Those personal experiences are also borne out by study after study after study. The Institute of Medicine has reported that 98,000 patients die in hospitals every year because of preventable injuries - more than the number of Americans who die from automobile accidents, breast cancer and AIDS combined. On an average day, 268 hospital patients will die as a result of preventable medical errors - and that doesn't count patients who are injured.

Many of those deaths and injuries occur because there is not a nurse at the bedside - a nurse trained to prevent, detect and respond to problems. Nurse understaffing is a significant factor in 1 out of 4 of those 98,000 annual deaths - half of all deaths due to respiratory failure.

The link between good quality and adequate nurse staffing is clear. You and I know it, patients know it, and the researchers know it. Numerous studies have concluded that inadequate nurse staffing is associated with higher rates of infection, gastrointestinal bleeding, pneumonia, cardiac arrest, urinary tract infection, postoperative infection, pressure ulcers and death. On the other hand, adequate staffing results in better outcomes and shorter stays. Nurses - given the time to monitor medications - were able to catch 86% of all prescription errors before the wrong prescription or wrong dosage got to their patients.

The difference was made also clear in the Aiken study - patients are 31% more likely to die in hospitals where nurses are required to care for 8 patients as opposed to hospitals where nurses care for 4 patients.

Lack of adequate nurse staffing in hospitals threatens patient care today - and it will threaten patient care even more in the future. We know that we are facing a nursing crisis - and there is a lot of effort to attract new people into the profession. But more and more, it is becoming clear that we cannot attract enough new nurses to replace the already-licensed nurses who are leaving hospital nursing. One in five licensed nurses is not practicing today. Every day, nurses who are dedicated to caring for patients leave the profession because they are asked to do the impossible - to struggle to provide quality care when faced with a patient load that is too simply big to handle.

There are those who will say that we cannot implement minimum safe staffing standards because there are not enough nurses available. I believe that they are wrong. By eliminating understaffing, I believe we will enable nurses to stay in nursing and encourage many of those who have left to return to the profession. By not implementing minimum safe staffing standards, by allowing understaffing to continue, by creating a workplace in which nurses are asked to do the impossible, we just drive

more and more nurses away. In other words, not doing anything about understaffing will guarantee that this crisis worsens - compromising patient care even more and exacerbating the growing nursing shortage.

I am anxious to hear from you tonight. I have already met with many nurses have told me their personal experiences, their fear that they didn't have time to check a medication or that they couldn't respond to a patient because they were too busy. I have heard nurses say that they don't take time for lunch or bathroom breaks but still can't get to every patient. I have heard nurses say that, years after leaving hospital nursing, they still wake up with cold sweats. I have heard from experts that nurses are experiencing a form of post-traumatic stress disorder because of their working conditions.

It is time to put an end to what is an unsustainable situation and a potentially deadly threat to patient care.

The bill I will soon introduce - the Nurse Staffing Standards for Patient Safety and Quality Care Act -- will improve patient quality by ensuring that nurses are given manageable patient loads. My bill will do several things.

First, like the California law, hospitals will be required to meet minimum staff staffing standards, including specified direct care registered nurse-to-patient ratios. Those standards will be part of a planning process under which hospitals and direct care nurses will establish staffing plans that maximize quality and patient safety based on the specific characteristics of their patient load and hospital. But the minimum ratios will make sure that there is a bottom line level of quality care that is guaranteed - that no hospital can fall below those guaranteed RN-patient staffing ratios.

Second, hospitals will have to post daily - for each shift and each unit - the actual ratio of nurses to patients so that patients, their families and nurses can ensure that standards are being met.

Third, nurses will be given the right to refuse assignments that violate those standards. This will make sure that standards are not just paper documents but that they translate into actual practice and patient care.

Fourth, nurses will be given whistleblower protections so that they can participate in the annual planning process and report quality problems or compliance failures without fear of retribution or retaliation.

Fifth, my bill also requires that HHS make recommendations to Congress to make sure that Medicare payments are sufficient to pay for quality nurse staffing.

As a member of the new House Nursing Caucus, I have already spoken with its co-chair, Rep. Lois Capps, herself a nurse, about understaffing. She has agreed to hold briefings this year to highlight the understaffing problem, to give nurses an opportunity to talk to Congress and the public about it, and to push for legislative solutions.

Patients are dying every day because there are too few nurses to care for them. Nurses have always been the best advocates for their patients' interests, and they are calling on us to act now. I have already heard from nurses in Illinois and around the country offering their help in promoting my bill, and I know that we will all work together to get the job done. I am proud to be working with you and with nurses around the country to require safe staffing standards - to improve health care quality and to protect patient safety.

I want to end by saying that we face critical elections this year - the Illinois primary next week and the November elections - just 8 months away. Many voters will want to know which candidates are committed to providing quality, affordable health care and which are not. They will want to know who is on their side, and who is not. They want to know who is going to push to protect patients' lives, and who is not.

As I said at the beginning, nurses are the single most trusted messengers on these issues. As you fight for the legislation that will improve patient safety, I urge you to fight for legislators who will support that legislation. We will never be victorious in improving patient safety if we don't have elected officials who put patients first.